

SUNSpots

OFFICIAL NEWSLETTER OF THE SASKATCHEWAN UNION OF NURSES

VOLUME 42 ISSUE 3 | DECEMBER 2016

**Happy Holidays from the
Saskatchewan Union of Nurses**

*May health, happiness,
peace and prosperity
be yours to share with others
this holiday season*

Navigating the Perfect Storm



Tracy Zambory, RN, President
Saskatchewan Union of Nurses

When I look at everything that's happening in today's healthcare environment, I can only imagine the pressures registered nurses are feeling on the frontlines every day. There are so many unknowns out there right now.

At a provincial level, Saskatchewan is exploring significant health system redesign, which will likely involve a merging of health regions among other potentially major changes. At a regional level, employers are struggling to makeup budget shortfalls and unfortunately this has been playing out in the form of layoffs, choosing not to fill vacancies, and the abolishment of registered nurse positions.

If you speak to a registered nurse today they will tell you that any decision that reduces the number of direct care providers to curb spending is a decision that will put patients at increased risk. They will tell you that they are already stretched thin; that they are too often working short-staffed; and that Saskatchewan is most certainly not in a position where any reductions in frontline staff can be made without compromising patient safety.

This past summer, the Saskatchewan Ministry of Health reported a very worrying 28% increase in Critical Incidents compared to last year, with most of those being related to the provision of direct care. In the spring, a survey of 1,500 SUN members found that 85% said they are aware of times patients have been put at risk due to short-staffing; with 45% of those reporting this occurs "frequently".

Couple these findings with the sustained high levels of overtime SUN members continue to work, and you get a picture of a system that is clearly running at full capacity with little room for manoeuvring.

These numbers are, however, of little surprise given the changing needs of our patient population — acuity and complexity is on the rise. Patients

now require a different level of care, attention and expertise — a fact SUN members are intensely aware of.

Unfortunately, all of this is happening just as the provincial economy has begun to falter and wane. Scarcely a day has gone by in recent weeks, where the province's major news outlets have not reported on Saskatchewan's dire economic outlook.

In a manner of speaking it's a perfect storm. A storm, I want to reassure you, SUN will help you weather.

SUN exists to represent you and your concerns in deliberations with government and employers. No matter the forum, SUN members can always be certain their union is giving them a voice — especially during these tumultuous times.

At SUN's 2016 Education Conference in October of this year, I referred to registered nurses as "key influencers" in Saskatchewan's healthcare system. I spoke about how our patients and the public have always looked to us for support, guidance and leadership — especially in times of great uncertainty.

Today, I ask you to once again to contemplate what it means to be an influencer. Remembering that your strength lies with your professional knowledge and expertise and that you are always supported by your union when you speak out.

As registered nurses, we recognize the importance of looking at healthcare holistically, whether it be for individual patients or the entire system. We understand that investing in models of care that prioritize safe staffing based on patient needs is the only path forward. And we know that there are already places in the system where more can be done to find savings without reducing frontline staff. It's these areas of opportunity that need be our starting points, and it's us, the registered nurses of this province, that need to lead the way.

Holiday Office Hours

Each year SUN Provincial rotates office closures between the Saskatoon and Regina offices to provide our dedicated staff the opportunity to enjoy the holidays.

During the 2016 holiday season, the Saskatoon SUN office will remain open to assist SUN members with their questions and concerns, with the exception of December 26 and 27, 2016, and January 2, 2017.

The Regina SUN office will be closed starting December 24, 2016, and will re-open for the new year on January 3, 2017.

During this time, SUN members can contact the Saskatoon office between 8:00 am and 4:30 pm by calling (800) 667-3294 or (306) 665-2100 or by emailing saskatoon@sun-nurses.sk.ca

Have a happy and safe holiday season!

New NAC Process

Joint Nursing Advisory Process

Overview

Rooted in a foundation of transparency, accountability, respect and open communications, the new Joint Nursing Advisory (NAC) Process is designed to take a proactive and collaborative approach to concerns regarding patient safety and safe nursing practice. Throughout development, the parties focused on setting goals and parameters to keep the NAC process moving forward in a timely, positive and productive manner.

SUN and SAHO's shared goals in developing a new collaborative process focused on ensuring patient safety concerns; providing an environment to meet professional standards and allow for safe practice; fostering quality care improvements; and supporting decision making based on evidence informed, best practices.

The methodology and principles behind the new process place emphasis on administrative fairness, supporting a non-judgemental and non-punitive method to raise and address concerns, providing a means for open communication and ensuring a respectfully and mutually beneficial relationship.

A key tool for success built into the new process, will be the ability for registered nurses and Nursing Managers to engage in low-level discussions and two-way communications to resolve issues in real time based on the needs and acuity levels of the patients.

Focused on removing barriers to success within the process, the parties have developed a clear and concise **algorithm** to guide both registered nurses and Nursing Managers through the entire process. In addition, a newly re-designed **SUN Work Situation Report (WSR)** form has been developed to capture additional information required to guide

evidence based practice and to track on-going issues to allow for a more collaborative, consistent and system-wide approach to on-going issues.

Uniform application of the process will be vital to ensuring issues are addressed in a timely, effective and proactive manner. To ensure an evidence informed practice continues to guide the process from start to finish, a newly developed **Management WSR Information Form** has been designed to guarantee a consistent approach in addressing WSRs is in place across the province.

The **Executive Oversight Committee** will play a key role in addressing trending or reoccurring and larger systemic issues, as they offer an additional level of support and provide guidance on the development, implementation, monitoring and continued evaluation of the Joint NAC process.

New to the NAC Process, tracking trending issues is viewed as an effective and beneficial way for all parties to collect meaningful data, conduct proactive evidence-based planning and mitigate reoccurring issues. Unique or one-time occurrences resolved using low resolution approaches would not be considered trending issues and would not require a WSR to be completed. However, instances resolved through low level resolution yet reoccur at a predictable or high rate of frequency, should be recorded on a WSR and marked as trending to be moved forward to the Executive Oversight Committee for review and recommendation.

For additional details on the process, please refer to Articles 56, 57 and Appendices B thru F of the SUN/SAHO Collective Agreement.

Joint NAC Terms of Reference

Purpose: The Joint Nursing Advisory Committee process is intended to be a collaborative approach to problem solving, involving SUN members and management working together. Using the goals, parameters and principles outlined in the Collaborative Problem Solving Process document, the parties will work together to resolve issues of mutual concern to ensure patient safety.

The Joint NAC will review, resolve and/or make recommendations regarding WSRs which are not resolved at the unit level.

- Members: (equal representation from both parties) (As per Article 57.03)
 - a. SUN Representatives
 - Base Hospital: Six (6) members to be appointed by SUN.
 - Regional Hospital: Four (4) members to be appointed by SUN.
 - All other Facilities/Agencies: Two (2) members to be appointed by SUN.
 - Regional and/or Multi-Facility: One (1) member per Facility or Agency with a minimum of two (2) members appointed by SUN.
 - b. Unit Level Manager(s) of the Units under discussion
 - c. Out-of-Scope Representatives
 - d. Resource Personnel, as determined by the parties.
- Meetings shall be scheduled at least once a month to discuss all WSRs, as per Article 57.09.
- Meetings will be jointly co-chaired by SUN and an Out-of-Scope Representative, as per Article 57.04. These positions should be a one-year term.
- An agenda of items, including a list of WSRs, shall be circulated to all members of the Joint NAC at least five (5) business days prior to each meeting, but this shall not restrict the right to raise issues without prior agenda notice, as per Article 57.05.
- Minutes of committee meetings shall be recorded, circulated and approved at the next Joint NAC meeting, as per Article 57.06.
- During the conduct of the meeting, the Joint NAC will adhere to the terms of the SUN-SAHO Collective Bargaining Agreement, and to the mutually agreed upon Collaborative Problem Solving Process for the meetings.
- The Joint NAC committee will be accountable to the Provincial SUN/SAHO NAC Executive Oversight Committee. The members of the Committee are accountable to SUN or the Regional Health Authority.

Collaborative Problem Solving Process

Goals

1. Patient Safety
2. Safe Practice
3. Quality Patient Care Improvement
4. Professional Standards
5. Evidence Informed Practice

Parameters

1. Consistency of Process
2. Lowest Level Resolve
3. Positive Resolution
4. Timeliness and Frequency of Meetings
5. Reason for Abeyance
6. Bring Forward Date

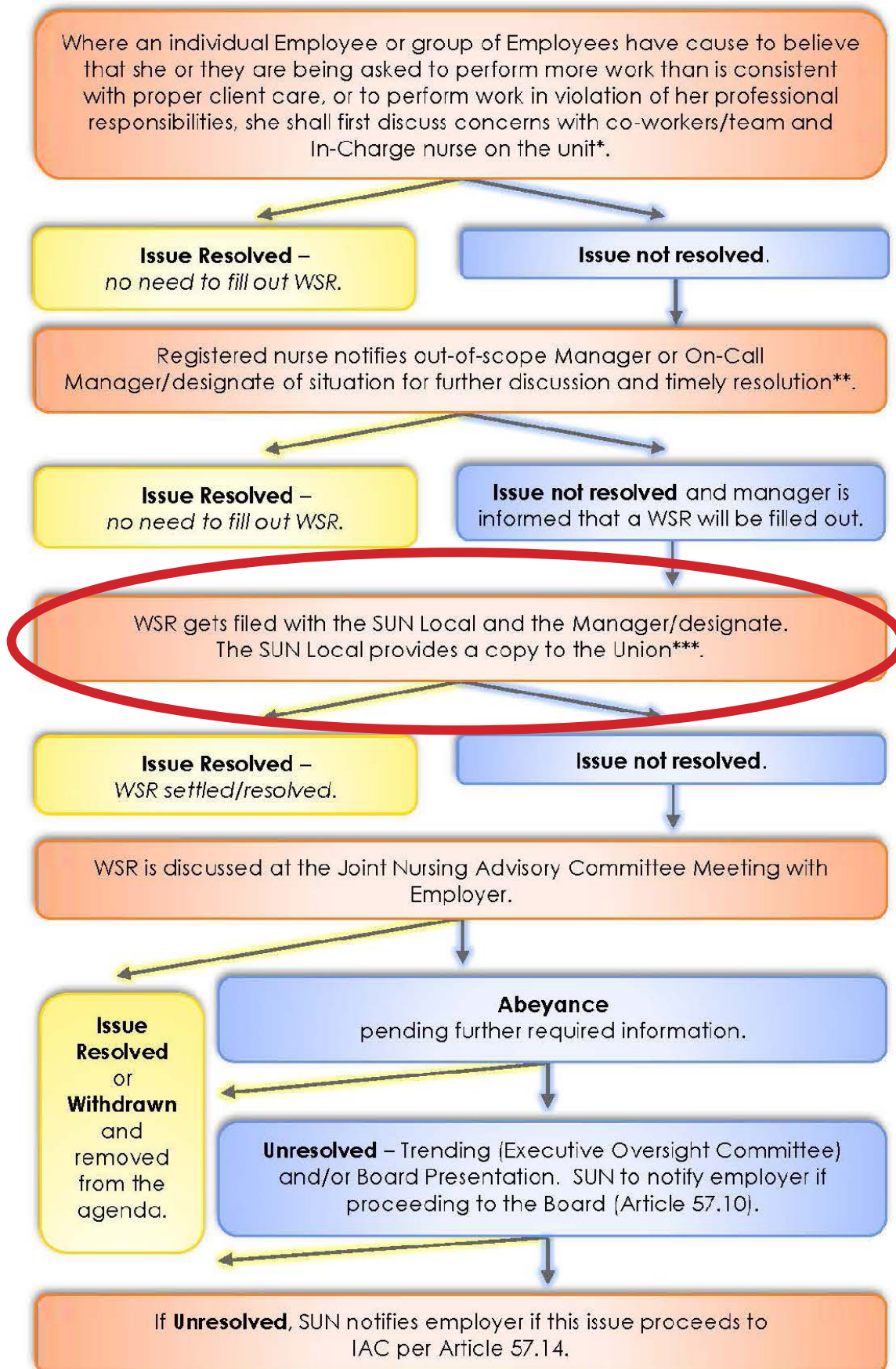
Principles

1. Administrative Fairness
2. Natural Justice
3. Non-Judgmental and Non-Punitive
4. Open Communication
5. Respect for the Process
6. Transparency and Accountability
7. Respectful and Mutually Beneficial Relationship

New Process Effective December 1, 2016

Look for new WSR Forms
in your workplace or
speak to your
Local Executive.

Algorithm Chart (page 174 of the Collective Agreement)



* The proactive process to resolution should include department/unit huddle, key discussions with coworkers, addressing staff shortages/workload issues with management. Resolution may include attempting to find more staff subject to criteria as per Article 9.03.

** Notification may include a face-to-face discussion or a telephone call. If no manager or On-Call Manager/designate is available, a voice message is left or email will be sent and a WSR filled out.

*** It is the manager's responsibility to follow up within 96 hours of notice under Article 56.03(c). (Article 56.04)

Tips for Completing a Work

SUN SASKATCHEWAN UNION OF NURSES

SUN Work Situation Report

WSR Tracking Number: _____

Employer: _____ Facility: _____ Local #: _____
 Unit/Agency: _____ Date: _____ Shift: _____
 Report Filed By: _____
 Personal Email: _____ Phone#: _____
 Names of other SUN members involved: _____

1

NUMBER OF BASELINE STAFF FOR SHIFT:
 RN: _____ RPN: _____ LPN: _____ Others: _____
Number of staff on duty:
 RN: _____ RPN: _____ LPN: _____ Others: _____
Number of staff needed:
 RN: _____ RPN: _____ LPN: _____ Others: _____
Charge Nurse? ☐ Yes ☐ No **On Site Management?** ☐ Yes ☐ No
 If yes, does the Charge Nurse have a patient assignment? ☐ Yes ☐ No

PATIENT/CLIENT CENSUS:
 # of Beds on Unit: _____
 Overcapacity: _____
 RN/RPN to Patient: _____
 Planned Patient Hours: _____
 Actual Patient Hours: _____

2

STEP 1: DESCRIBE THE ACTIONS TAKEN FOR LOW LEVEL RESOLUTION
☐ Department / Unit Huddle ☐ Discussion with co-workers/Charge Nurse
☐ Discussion with RN manager/supervisor ☐ Written discussion (Prioritizing workload, postponing tasks, calling other unit, etc.)
☐ Other (please explain below): _____
Is this an ongoing issue or repeat incident that should be identified for trending purposes?
☐ Yes ☐ No

3

STEP 2: NOTIFICATION OF MANAGER OR DESIGNATE
 Manager Notified? ☐ Yes ☐ No Is Manager an ☐ RN? ☐ RPN?
 Method of communication: ☐ Face-to-face ☐ Telephone conversation ☐ Voice mail ☐ Email
 Name of Manager Notified: _____
 Response by Manager: _____
If a Manager or On-Call Manager/designate is NOT available, was staff called in as per Article 9.03?
☐ Yes ☐ No
Was Call-In Criteria as per Article 9.03 used? ☐ Yes ☐ No **Who was called in?** _____

4

DESCRIBING THE INCIDENT
 • In the following section, please check off all applicable descriptors under each question; only check off what you know to be factual. If needed, please utilize the "additional details/other" fields.
 • Where applicable, please include additional information in the space(s) provided.
 • The following questions are designed to focus on the environment and professional barriers, and factors that may have prohibited you from providing safe patient care or meeting your professional standards.

Work Situation Report | Page 1 of 3

EXPLANATION OF WHAT MADE YOUR SHIFT UNSAFE?

- ☐ Too many patients
☐ Wrong skill mix (i.e. need RN, LPN or 1:1)
☐ Inability to monitor, observe or check patient(s)
☐ Nursing code of ethics breached or risk of breach
☐ Physician related concerns
☐ Leaves not replaced
☐ Isolation precautions
☐ Supports not available (management, PT, SW, etc.)
☐ Additional details/other: (please specify below) _____

NURSING STANDARDS AND FOUNDATIONAL COMPETENCIES NOT MAINTAINED OR POTENTIAL FOR?

- ☐ SRNA Standards ☐ RPNAS Standards
☐ CNA Code of Ethics ☐ Employer/Region Policies
☐ National Standards

Please provide additional detail including the specific references: _____

HOW WAS THE UNSAFE SITUATION RECTIFIED? (choose all that apply)

- ☐ It was not rectified
☐ Obtained correct skill mix of staff
☐ Closed the unit to admissions/bed closed
☐ Ongoing issue for further monitor (please explain below) _____

WHAT IMPACT DID THIS HAVE ON PATIENT CARE? (choose all that apply)

- ☐ Increased length of stay for patient(s)
☐ Negative outcome, harm or incident (i.e. fall, med error)
☐ Patient(s) left without being seen
☐ Delayed or cancelled treatment or programming
☐ Incomplete discharge planning/teaching
☐ Additional details/other: (please specify below) _____

ACTION TAKEN (choose all that apply and provide additional detail if required)

- What action(s) did you take or will take, to continue to advocate for safe patient care?
☐ Repeated phone calls to Manager ☐ Unit/bed closed
☐ Worked shift without assistance ☐ Contacted SUN
☐ Notify nurses on next shift ☐ Contacted SRI
☐ Notify On-Call Manager ☐ Notify Local
☐ Stop the line ☐ Occurrence/S
☐ Additional details/other: (please specify below) _____

1 Staffing Mix

Provides a snapshot of what the staffing levels were for this situation. Include the baseline staff, staff present during shift, and what staff was required to meet the needs of the patient/client census.

2 Patient/Client Census

Top section reflects patient census for acute care situations; bottom section reflects client census for home care/public health.

3 STEP 1: Low Level Resolution

- Identify actions taken to attempt to find a low level resolution.
- Check boxes are only suggestions; use the OTHER field if required.

- "Trending": Instances resolved through low level resolution yet reoccur at a predictable or high rate of frequency, should be recorded on a WSR and marked as trending. Unique or one-time occurrences resolved using low level resolution would not be considered trending issues and do not require a WSR to be completed.

4 STEP 2: Notification of Manager

Identify the method in which you contacted the Manager or On-Call Manager/designate regarding the issue. If required, identify if additional staff was called in.

5 Describing the Incident

- Check all boxes that apply to your situation, only check off what you know to be factual.
- Check boxes provide suggestions of details to report.

WSR Tracking Number: _____

(Choose all that apply and provide additional detail if required)

High acuity
Not enough qualified staff/Jr. Sr. mix
Inadequate orientation/training/equipment
Staff safety concerns
Physical layout of facility/unit
Non nursing duties
Patient negative outcome, harm or incident
Equipment/supply issues
Workload

TENCIES BREACHED,

☐ OHS Legislation
☐ 24 Hours RN/RPN Coverage

(Choose all that apply and provide additional detail if required)

Obtained correct number of staff
Refused assignment/I was reassigned
Provided the necessary training/preceptor
Additional details/other: (please specify below)

(Choose all that apply and provide additional detail if required)

Inability to answer call lights
Incomplete admissions
Incomplete assessments
Inadequate patient pain management
Inability to give or receive report
Inability to practice safe patient care

ate for your patients?

ure
N Provincial
NA/RPNAS/CNPS

safety Report # _____

Work Situation Report | Page 2 of 3

WSR Tracking Number: _____

BRIEFLY DESCRIBE THE INCIDENT

6

HOW CAN THIS ISSUE BE RESOLVED IN THE FUTURE? *(please provide details and examples of your solution)*

7

SIGNATURE OF NURSE(S)

8

STEP 3: WSR COMPLETED

☐ Copy sent to the Local *(photo copy or scanned and emailed)* ☐ Copy to Manager *(photo copy or scanned and emailed)*

9

STEP 4: NOTIFICATION OF MANAGER OR DESIGNATE

For Manager Use Only

Date + Time: _____ Manager Name: _____ ☐ Copy sent to SAHO
(scanned and emailed)

How was the issue addressed:

10

Work Situation Report | Page 3 of 3

- Where applicable, use the “additional details/other” fields provided.
- Questions are designed to focus on the environment and professional barriers, as well as factors that may have prohibited you from providing safe patient care or meeting your professional standards.

This section is your opportunity to describe the situation in more detail or provide additional information not captured through the check boxes.

Registered nurses completing a WSR are required to provide their suggested solutions to resolve the issue and to prevent future re-occurrences. Form may be considered incomplete if solutions are not provided.

Signatures of the SUN members listed in the opening section (page 1 of the form) are required to complete the form.

Once completed, it is the Nurses' responsibility to get copies of the form to the Local and the Manager/designate:

- Original form goes to the Local
- Photocopy provided to or scanned version emailed to the Manager/designate
- Keep a copy for your records

This section is to be completed by the Manager/designate **within 96 hours of notice of the incident.**

Joint Nursing Advisory Process

Steps in the Problem Solving Process

STEP 1: LOW LEVEL RESOLUTION

56.03 *Where an individual Employee or group of Employees have cause to believe that she or they are being asked to perform more work than is consistent with proper client care, or to perform work in violation of her professional responsibilities, she shall first discuss concerns with co-workers/team and In-Charge nurse on the unit, as provided in Joint Nursing Advisory Process Algorithm Chart (Appendix B).*

WHAT DOES THIS MEAN??

Low level resolution is intended to provide registered nurses with the ability to address concerns impacting patient safety and nursing practice in real-time.

Working with members of the nursing team and In-Charge Nurse available at the time of the incident, you and your colleagues have the ability to determine reasonable solutions to meet patient needs.

If discussions at Step 1 do not result in effective resolution of the incident, proceed to Step 2.

STEP 2: NOTIFICATION OF MANAGER OR DESIGNATE

IF THE ISSUE IS NOT RESOLVED:

The registered nurse notifies the Manager or On-Call Manager/designate of the situation for further discussion and timely resolution. Resolution may include attempting to find more staff subject to criteria as per Article 9.03.

9.03 *If additional staff are necessary and no registered nurse management personnel are available, the registered nurse designated in charge shall have the authority to call such additional staff subject to criteria established by the Employer in consultation with the registered nurses in the work Unit. In the event the Employer has not established criteria, the registered nurse shall have the authority to call additional staff that in her professional opinion are necessary.*

WHAT DOES THIS MEAN??

Step 2 provides an additional opportunity to resolve issues in real-time. Registered nurses are required to discuss the issue with their Manager/designate either in person or via telephone conversation in an attempt to find a quick and effective resolution.

If, after the discussion, the issue is **still unresolved or only partially resolved, a WSR should be filed**. At this time, advise the Manager/designate that a WSR will be filed. *NOTE: When notifying a Manager of an issue, you must give the Manager/designate a reasonable amount of time to attempt to resolve the issue - this will be unique for each situation.*

If you are **not able to communicate directly to a Manager/designate**, a voice mail is left or an email will be sent identifying the issue, steps taken, and that **a WSR will be filed**.

STEP 3: WSR REPORT COMPLETED

The WSR gets filed with the SUN Local and the Manager/designate. The SUN Local provides a copy to the Union.

WHEN FILLING OUT A WSR....

- Complete all applicable sections; provide additional detail when/where applicable.
- Don't forget to provide solutions to avoid the issue recurring in the future. (This piece is required.)
- Don't forget to sign the form!
- It is the Member's responsibility to provide the Manager/designate with a photocopy or emailed copy of the WSR.
- Don't forget to keep a copy of the completed form for your records.

STEP 4: MANAGER TO FOLLOW UP WITHIN 96 HOURS OF NOTICE

56.04 It is the Employer's responsibility to follow up within 96 hours of notice. If not resolved, the WSR will be discussed at the Joint Nursing Advisory Committee meeting with the Employer.



Arbitration Award in SUN's Favour

SUN v. PAPHR – Wellness Policy Grievance

In 2013, the Saskatchewan Union of Nurses (SUN) filed a policy grievance against the Prince Albert Parkland Health Region's (PAPHR) Wellness Policy which withheld pay from employees who called in sick, until the illness had been verified utilizing a Two-Call System. The grievance also challenged the reasonableness of the Policy with respect to the requirement for employees to complete a Health Care Practitioner Abilities (HCP) Form in every instance of sick leave.

Firm in our belief that this policy was unreasonable and a violation of the Collective Agreement and inappropriately required personal health information at the time of the illness, SUN presented the grievance at an arbitration hearing which began in October of 2015 and concluded on April 4-7, 2016.

The following are direct excerpts from the recent Arbitration decision (September 2016) awarded in SUN's favour:

- *"The Wellness Support Policies are at complete odds with the Collective Agreement."*
- *"There is no requirement in the Collective Agreement for the sick employee to make a second call before he/she can access the sick leave benefits. One call suffices."*
- *"The Employer has no right, by policy or otherwise, to code the sick leave as unverified and withhold access to earned sick leave credits."*
- *"Put simply, the Employer cannot, by a policy, circumvent the sick leave and sick leave benefits the parties have negotiated and agreed to in the Collective Agreement without the further agreement of the Union."*
- *"There must be a reasonable basis to request the employee provide personal health information to prove illness."*
- *"...the medical information required by the Employer on the Health Care Practitioner Abilities Form (HCP) forms would in most cases go far beyond what is reasonably required at the initial call stage to establish the illness is bona fide."*
- *"We question what right the employer has to deny the employee the right to sick leave credits when sick and unable to perform regular duties to explore and/or compel the sick employee to perform modified duties or work in a modified or another position."*

NOTE: The Arbitration Awards makes reference to a Step 1 Call and a Step 2 Call; the Panel is referring to the 1st Call (Step 1 Call) and the 2nd Call (Step 2 Call) identified in the policy.

In addition the Arbitration Award noted the requirement to make two (2) calls, when sick, exceeds the obligation of the employee as set out in the Collective Agreement (under Article 18.09) which clearly states ONE call to notify the employer. The Panel felt the blanket policy of requiring the call back verification is arbitrary and nonsensical and that a policy which restricts employees from exercising a negotiated right is unreasonable. The Panel reinforced SUN's position that workplace policies must not only be consistent with the Collective Agreement, they must also be reasonable.

The Employer has been ordered to cease administering the Policies.

This is an important decision for the SUN members beyond those members employed by PAPHR, as it can assist members across the province where similar Policies have been implemented.

For a complete copy of the decision and SUN's critique of the award, visit SUN's website at sun-nurses.sk.ca/labour-relations/arbitration-awards.

If you have questions regarding the recent Arbitration decision or want to clarify the validity of similar policies in your Health Region, please contact Duty Roster at 800-667-7060.

FYI: Changes to Waiting Period for EI Claim

Effective January 1, 2017, the waiting period for Employment Insurance (EI) claims will change from two (2) weeks to one (1) week.

This modification is based on legislative changes to the *Employment Insurance Act*, following the *Budget Implementation Act, 2016, No. 1*, which received royal assent on June 22, 2016. Changes to the *Employment Insurance Regulations* are also expected as a result of this legislative change.

SUN and SAHO agree that the above change will affect the SUN/SAHO Collective Agreement in Article 17.04 Maternity/Parental/Adoption Leave, in (e) Supplemental Employment Insurance; wherever in this clause it references the two (2) week waiting period, it would be changed to **"one (1) week waiting period"**.

If you are accessing the provisions under the Collective Agreement, please be aware of the new waiting period.

Getting Ready for 2017 Annual Meeting

2017 Elections

Are you interested in taking on a new role in your Union? Do you have new ideas and suggestions for advancing and promoting the registered nursing profession? Are you looking to further your leadership skills and get involved in the strategic direction of SUN?

If you answered yes to any of the above questions — then a seat on the SUN Board of Directors is waiting for you!

The Nominations Committee is currently seeking nominations for the following positions:

Board of Directors

- President (2 year term)
- Second Vice-President (2 year term)
- Region Representatives – Region 1, 3, 5 and 7 (2 year term)

Standing Committees

- Constitution, Bylaws and Resolutions Committee (Four (4) to be elected)
- Finance Committee (Two (2) to be elected)
- Nominations Committee (Three (3) to be elected)
- Program Committee (Five (5) to be elected)
- Provincial Negotiations Committee (Twelve (12) to be elected)
 - a) Five (5) members from hospital/community based facilities
 - One (1) member from Saskatoon base hospitals
 - One (1) member from Regina base hospitals
 - One (1) member from Regional hospitals
 - One (1) member from Community Based Facilities (hospitals, wellness centres)
 - One (1) member from Integrated Facilities
 - b) One (1) member from Home Care
 - c) One (1) member from Long Term Care
 - d) One (1) member from Extendicare
 - e) One (1) member from Canadian Blood Services
 - f) One (1) member from Public Health
 - g) One (1) member from Mental Health
 - h) One (1) member from the North (defined as SUN Locals north of the 54th parallel)

Nominees are to refer to Bylaw 4.0 and Membership Policy 023-M-2007 for further details regarding their official nomination.

For more information on each position, please visit our website at sun-nurses.sk.ca and click on the election banner.

Nomination forms are available from your Local Executive or by visiting our website.

Deadline for nominations is 1630 hours on January 19, 2016. Nominations forms must be received at the Regina SUN office by the deadline. Nominations received after the deadline of 1630 hours, January 19, 2016 will not be accepted.

Call for Resolutions and/or Bylaw Amendments and Call for SUN Negotiations Committees Considerations

The SUN 2017 Annual Meeting is scheduled for April 26, 27. Resolutions must be submitted on the appropriate forms for:

- 1) Business Resolutions,
- 2) Proposed Amendments to the Union's Constitution and Bylaws, and
- 3) Considerations for the SUN Negotiations Committees.

According to Membership Policy 014-M-2007 (Resolutions with Financial Components), all Annual Meeting resolutions with a financial component must be accompanied by cost implications, upon submission.

Each form must be signed by two members of the Union and submitted to reach the Regina office no later than January 6, 2017 at 1630 hours.

NOTE: Allow ample time if mailing — consider other means if you have slow mail service. Any forms that are faxed to the Regina SUN office must be followed up with a phone call to confirm the fax was received. The original must also be sent in to the Regina SUN office by mail.

PROPOSED AMENDMENTS RECEIVED AFTER THE DEADLINE CANNOT BE CONSIDERED
Resolution forms are available
on SUN's website at
sun-nurses.sk.ca/2017-agm/resolutions



Lifetime Membership Nominations

SUN Provincial Life Memberships are presented each year at the SUN Annual Meeting.

The Provincial Life Membership Committee invites SUN members to nominate candidates they feel qualify for this award as described in Membership Policy 029-M-2007 (Life and Honourary Memberships and Allied Personnel). The committee will make recommendations to the Board of Directors for approval, based on the information and qualifications of the nominee that are provided.

Those who nominate members for this award will be expected to present a description of the nominee's contribution to SUN, during recognition at the Annual Meeting.

Excerpt from Membership Policy 029-M-2007

The nominee shall meet the following criteria:

1. At least ten (10) years membership prior to date of retirement, in good standing in the Union.
2. Provided leadership and/or participated in various capacities at the Local or provincial level and/or served the Union in various vital capacities, for example provincial committees, Board of Directors or long-term Local Presidents.
3. Provided exemplary service to SUN.
4. No longer employed as a SUN member.

Nominations are to be received in the Regina SUN office by March 10, 2017 in order that the appropriate arrangements can take place.



Leadership Awards Nominations

The Leadership Award is part of SUN's Member Recognition Program. This award is to recognize members who have been active participants at the Local or District level in advancing the goals and objectives of the Union.

Up to three (3) Leadership Awards will be presented on the first day of the Annual Meeting. This award is not retroactive and serving Board members are not eligible for nomination. Selection will be made by the Executive Committee and approved by the Board of Directors.

Any SUN member in good standing may nominate a SUN member who meets the following criteria:

- Has shown outstanding commitment to union principles
- Has shown outstanding leadership qualities
- Has shown willingness to stand up for nurses and patients
- Must be a member in good standing who has been an active participant at the local and/or district council and/or provincial level for a minimum of 10 years
- Exhibits high professional skill in nursing practice
- Made personal contribution affecting labour relations for nurses and nursing
- Has participated in actions to improve nursing practice environment.

The nominator shall attach a 300-500 word essay demonstrating how the SUN member nominated meets or exceeds the established criteria. This essay will be used at the Annual Meeting when presentations are made.

Submit the nomination submission to Executive Committee by **March 1, 2017**.

If you require more information please contact Denise Dick, First Vice President at 1-800-667-7060 or visit our website at www.sun-nurses.sk.ca and refer to Membership Policy 047-M-2010.

Mail to:

SUN Executive Committee
2330 2nd Avenue
Regina, Saskatchewan S4R 1A6

Nomination forms can be downloaded from SUN's website at sun-nurses.sk.ca/2017-agm



43rd Annual Meeting

Queensbury Convention Centre
at Evraz Place, Regina

April 25-27, 2017

Details available March 2017

Return Undeliverable Canadian Addresses to:

2330 2nd Avenue
Regina, SK S4R 1A6
Telephone: 306-525-1666
Toll Free: 1-800-667-7060
Fax: 306-522-4612
E-mail: regina@sun-nurses.sk.ca
Web site: www.sun-nurses.sk.ca

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